



Certificate of Need Task Force

August 25, 2005

Recap of August 11, 2005 Task Force Meeting

Issue	Task Force Recommendation/ Follow-up
<u>CON Coverage Issues:</u> Hospice Services Ambulatory Surgery Services	<ul style="list-style-type: none">•Maintain requirement for CON•Request Staff to develop additional information
<u>CON Review Process Issues:</u> Interested Party Completeness Review Capital Threshold	<ul style="list-style-type: none">•Further discussion of two issues: (1) designation of third party payers as interested parties; (2) definition of adversely affected.•Discussion Deferred•Increase to \$10.0 million

State Health Plan Update

Options

- **Defer review of all new CON applications until State Health Plan is fully revised and updated**
- **Continue review of CON applications and focus on updating only those portions of State Health Plan chapters needed to review the types of CON applications likely to be filed over the next 12 to 24-months**
- **Target 1-2 State Health Plan chapters for a full revision annually**

LICENSING ACUTE CARE HOSPITAL BEDS IN MARYLAND

Greater Baltimore Medical Center

Patient Days, FYE 3/31/05: 74,718

Average Daily Census: 204.9

Licensed Acute Care Beds, FY2006:
 $204.9 \times 1.4 = 287$

LICENSING ACUTE CARE HOSPITAL BEDS IN MARYLAND

Greater Baltimore Medical Center **FY2006**

MSGA:	219
Pediatric:	8
Obstetric:	60
Psychiatric:	<u>0</u>
	287

LICENSING ACUTE CARE HOSPITAL BEDS IN MARYLAND

Greater Baltimore Medical Center

Total Licensed Bed Capacity: 287

Total Physical Bed Capacity: 342

LICENSING ACUTE CARE HOSPITAL BEDS IN MARYLAND

Greater Baltimore Medical Center

2000: 372

2001: 308

2002: 323

2003: 303

2004: 314

2005: 300

2006: 287

LICENSING ACUTE CARE HOSPITAL BEDS IN MARYLAND

	<u>Maryland</u>					
	<u>WM</u>	<u>MC</u>	<u>SM</u>	<u>CM</u>	<u>ES</u>	<u>MD</u>
2000:	1,011	1,512	1,625	7,314	866	12,328
2001:	784	1,294	1,077	5,714	693	9,562
2002:	761	1,302	1,082	5,919	727	9,791
2003:	766	1,299	1,143	6,052	734	9,994
2004:	756	1,305	1,153	6,129	723	10,066
2005:	782	1,338	1,190	6,258	753	10,321
2006:	779	1,298	1,155	6,328	763	10,323

PROJECTING THE NEED FOR MSGA BEDS IN MARYLAND

Baltimore County

Projected Patient Days, CY2010:
286,740 – 317,400

Projected Average Daily Census:
785.6 – 869.6

Projected Gross Bed Need, CY2010:
785.6 x 1.25 = 982
869.6 x 1.25 = 1,087

PROJECTING THE NEED FOR MSGA BEDS IN MARYLAND

Baltimore County – 4 Acute Care General Hospitals

MSGA Beds Needed, 2010: 982-1,087

Total Licensed MSGA Beds, FY2006: 983

Total Acute Care Beds

	<u>Licensed</u>	<u>Physical Capacity</u>
Franklin Square:	343	329
GBMC:	287	342
Northwest:	209	190
St. Joseph:	<u>342</u>	<u>354</u>
Total	1,181	1,215

PROJECTING THE NEED FOR MSGA BEDS IN MARYLAND

- **Franklin Square Hospital and Northwest Hospital Center can add additional bed capacity without reference to projected bed need in Baltimore County – 14 beds at FSH and 19 beds at NHC. A CON application would be required for bed additions exceeding these amounts.**
- **Greater Baltimore Medical Center and St. Joseph Medical Center can only acquire additional bed capacity through a CON application**

PROJECTING THE NEED FOR MSGA BEDS IN MARYLAND

MHCC Occupancy Rate Scale for MSGA Beds

<u>ADC</u>	<u>Avg. Ann. Occupancy Rate</u>
0-49	70% (143% rule)
50-99	75% (133% rule)
100-299	80% (125% rule)
300+	83% (120% rule)

PROJECTING THE NEED FOR PEDIATRIC BEDS IN MARYLAND

MHCC Occupancy Rate Scale for Pediatric Beds

<u>ADC</u>	<u>Avg. Ann. Occupancy Rate</u>
0-6	50% (200% rule)
7-24	65% (154% rule)
25-49	70% (143% rule)
50-99	75% (133% rule)
100+	80% (125% rule)

PROJECTING THE NEED FOR OBSTETRIC AND PSYCHIATRIC BEDS IN MARYLAND

- **No Bed Need Projection or Occupancy Rate Scale for Obstetric Beds**
- **Single Occupancy Rate Standard of 80% for Acute Psychiatric Beds**

Licensure of Total Acute Care Hospital Beds and Projected MSGA Bed Need

Options

- Eliminate 140% Rule for Licensing Beds**
- Adopt the 71.4% Average Annual Occupancy Rate Assumption Implied by the 140% Rule as the Occupancy Rate Standard Used in Bed Need Projection**
- Eliminate CON Regulation of Expansion of Hospital Bed Capacity**
- Adopt the Occupancy Rate Scale Used in the State Health Plan as the Implied Average Annual Occupancy Rate in Hospital Licensure**

Completeness Review and Re-Docketing

Restructure Review Process

- **Require two conferences in the review of any CON application.**
 - **Application Review Conference**
 - **Project Status Conference**
- **Allow for changes in a project that bring it in closer conformance with the staff's or Reviewer's analysis, without penalizing such changes by adding more process or time to the review.**

Interested Party

- **Designation of Third Party Payers**
- **Definition of Adversely Affected**

Meeting Schedule

Certificate of Need Program Task Force

The CON Task Force will meet at the following times:

- **Thursday, September 8, 2005**
1:00 p.m.

- **Thursday, September 22, 2005**
1:00 p.m.

All meetings of the CON Task Force are open to the public and will be held in Conference Room 100 at the Maryland Health Care Commission (4160 Patterson Avenue, Baltimore, Maryland).

Additional information about meetings of the Certificate of Need Task Force may be obtained from the Commission's website: www.mhcc.state.md.us